UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	740145-271
First Inventor	Tomoyoshi ARIMOTO et al.
Title	DEVICE FOR OPERATING A HIGH PRESSURE DISCHARGE LAMP
Express Mail Label No.	

APPLICATION ELEMENTS

See *MPEP chapter 600 concerning utility patent application contents.*

ADDRESS TO: Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. ☐ Applicant claims small entity status.
See 37 CFR 1.27.
3. ☒ Specification [Total Pages 18]
(preferred arrangement set forth below)
   - Descriptive title of the invention
   - Cross Reference to Related Applications *(if applicable)*
   - Statement Regarding Fed sponsored R & D *(if applicable)*
   - Reference to sequence listing, a table, or a computer program listing appendix *(if applicable)*
   - Background of the Invention
   - Brief Summary of the Invention
   - Brief Description of the Drawings *(if filed)*
   - Detailed Description
   - Claim(s)
   - Abstract of the Disclosure
4. ☒ Drawing(s) *(35 U.S.C. 113)* [Total Sheets 12]
5. Oath or Declaration [Total Pages 1]
   a. ☒ Newly executed (original or copy)
   b. ☐ Unsigned
   c. ☐ Copy from a prior application (37 CFR 1.63(d))
   (for continuation/divisional with Box 18 completed)
      i. ☐ DELETION OF INVENTOR(S)
      Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)
6. ☒ Application Data Sheet. See 37 CFR 1.76
7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission *(if applicable, all necessary)*
   a. ☐ Computer Readable Form (CRF)
   b. Specification Sequence Listing on:
      i. ☐ CD-ROM or CD-R (2 copies; or
      ii. ☐ paper
   c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. ☒ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement ☐ Power of Attorney
(when there is an assignee)
11. ☐ English Translation Document *(if applicable)*
12. ☒ Information Disclosure Statement (IDS)/PTO-1449 ☒ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
15. ☒ Certified Copy of Japanese Priority Document No. 2002-295864 Filed: October 9, 2002
16. ☐ Nonpublication request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☒ Other: Change of Correspondence Address

18. If a CONTINUING APPLICATION, *check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:*

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: _____/_____

Prior application information: Examiner_____ Group / Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

☒ *Customer Number or Bar Code Label* 22204 or ☐ *Correspondence address below*

Name			
Address			
City	State	Zip Code	
Country	Telephone	Fax	

Name (Print/Type)	David S. Safran	Registration No. (Attorney/Agent)	27,997
Signature		Date	October 9, 2003

15535 U.S. PTO
10/681215
10/09/03

FEE TRANSMITTAL FOR FY 2003

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT $810.00

Complete if Known	
Application Number	New Application
Filing Date	October 9, 2003
First Named Inventor	Tomoyoshi ARIMOTO et al.
Examiner Name	
Art Unit	
Attorney Docket No.	740145-271

METHOD OF PAYMENT *(check all that apply)*

☒ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit Account Number: 19-2380 (740145-271)

Deposit Account Name: Nixon Peabody LLP

The Commissioner is authorized to: *(check all that apply)*

☐ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s)

☐ Charge fee(s) indicated below, **except for the filing fee** to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code	Large Entity Fee ($)	Small Entity Fee Code	Small Entity Fee ($)	Fee Description	Fee Paid
1001	770	2001	385	Utility filing fee	$770
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1) $770.00

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

			Extra Claims		Fee from below		Fee Paid
Total Claims	6	-20** =	0	X		=	
Independent Claims	4	-3** =	0	X		=	
Multiple Dependent				X		=	

Large Entity Fee Code	Large Entity Fee ($)	Small Entity Fee Code	Small Entity Fee ($)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	86	2204	43	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) $

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code	Large Entity Fee ($)	Small Entity Fee Code	Small Entity Fee ($)	Fee Description	
1051	130	2051	65	Surcharge – late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for *ex parte* reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	420	2252	210	Extension for reply within second month	
1253	950	2253	475	Extension for reply within third month	
1254	1,480	2254	740	Extension for reply within fourth month	
1255	2,010	2255	1,005	Extension for reply within fifth month	
1401	330	2401	165	Notice of Appeal	
1402	330	2402	165	Filing a brief in support of an appeal	
1403	290	2403	145	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive – unavoidable	
1453	1,330	2453	665	Petition to revive – unintentional	
1501	1,330	2501	665	Utility issue fee (or reissue)	
1502	480	2502	240	Design issue fee	
1503	640	2503	320	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	$40.00
1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))	
1801	770	2801	385	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) $40.00

SUBMITTED BY

Name *(Print/Type)*	David S. Safran	Registration No. *(Attorney/Agent)*	27,997	Telephone	(202) 585-8000
Signature				Date	October 9, 2003

Complete *(if applicable)*

CHANGE OF CORRESPONDENCE ADDRESS *Application* Address to: Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450		
	Application Number	New Application
	Filing Date	October 9, 2003
	First Named Inventor	Tomoyoshi ARIMOTO et al.
	Art Unit	Unknown
	Examiner Name	Unknown
	Attorney Docket Number	740145-271

Please change the Correspondence Address for the above-identified application to: ☐ Customer Number [ ] → *Type Customer Number here* ***OR***					*Place Customer Number Bar Code Label here*
☒ **Firm *or* Individual Name**	Nixon Peabody LLP				
Address	401 9th Street, N.W., Suite 900				
Address					
City	Washington, D.C.	**State**		**ZIP**	20004-2128
Country	U.S.A.				
Telephone	202-585-8000	**Fax**	202-585-8080		

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the:

☐ Applicant/Inventor

☐ Assignee of record of the entire interest.
Certificate under 37 CFF 3.73(b) is enclosed. (Form PTO/SB/96).

☒ Attorney or agent of record.

☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Type or Printed Name	David S. Safran
Signature	
Date	October 9, 2003

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.